

REFERRAL AGREEMENT

This form approved by the North Dakota Association of REALTORS®, which disclaims any liability out of use or misuse of this form. This form is only for use by licensed REALTORS® in the State of North Dakota.

1 **DATE:** _____

2 **REFERRING BROKER INFORMATION:**

3 Brokerage: _____ Agent(s) Name: _____

4 Address: _____

5 City: _____ State: _____ Zip Code: _____

6 Phone: _____ Email: _____

7 **RECEIVING BROKER INFORMATION:**

8 Brokerage: _____ Agent(s) Name: _____

9 Address: _____

10 City: _____ State: _____ Zip Code: _____

11 Phone: _____ Email: _____

12 **PROSPECT INFORMATION:**

13 Name: _____

14 Address: _____

15 City: _____ State: _____ Zip Code: _____

16 Phone: _____ Email: _____

17 Service Desired/Information: _____

18 _____

19 **COMPENSATION:** Referring Broker is compensated in connection with any real estate related contract or
20 transaction involving Prospect as follows:

21 ☐ \$ _____

22 ☐ _____ % of listing side commission received by Receiving Broker on any real estate transaction
23 involving the Prospect.

24 ☐ _____ % of selling side commission received by Receiving Broker on any real estate transaction
25 involving the Prospect.

26 ☐ Other: _____

27 Referring Broker shall provide Receiving Broker a completed IRS Form W-9. Receiving Broker shall provide
28 Referring Broker with Settlement Statement and pay the referral fee to the Referring Broker within five (5)
29 business days of Receiving Broker's receipt of the commission on the transaction involving the Prospect.

30
31 _____
Referring Broker Signature Date

Receiving Broker Signature Date